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	ICE ADDRESS (Noto: Use Bloc	6	Foo	c(s) Transmittal. This certifiers. Each additional paper to its own certificate of materials.	icate cannot be used for , such as an assignment	rany other accompanying	
MACMILLAN,	93/21/2 SOBANSKI & T PLAZA-FIFTH F REET	ODD, LLC LOOR (UN 18 LOOT I hadd	Certificate of Mailing or Transmission I hereby certify that this Foc(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being fussimile transmitted to the USPTQ (571) 273-2885, on the date indicated below.			
TOLEDO, OH 43	604	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TO TRADELIAME	Tlene Bu	amp 15+pr	(Depositor's name)	
		V.	TRADEUM	Slone Run	maiston	(Rignature)	
				6/18	107	(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR	ATTORNEY DOCKET NO. C		CONFIRMATION NO.	
10/742,341 12/19/2003		David A. Hein	66/18/2007	NCS#78H2 0000010	3 1300 <i>8</i> 5 ¹⁴ 10742341		
TITLE OF INVENTION:	VEHICLE ACCESSOR	Y PROXIMITY SENSO	OR SLIDE SWITCH	01 FC:1501 02 FC:1504	1400.00 DA	1	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUB	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	06/21/2007	
EXAMINER ART UNIT			CLASS-SUBCLASS	7			
NGUYEN, CUONG H 3661		701-036000	.				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
(A) NAME OF ASSIGN	a an assignee is identifi in 37 CFR 3.11. Comple NEB NORA FION	ed below, no assignee clion of this form is NO	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY	Patent. If an assignce is ideasignment. Yeard STATE OR COUNT	RY)		
4a. The following fee(s) are submitted: X Issue Fee			b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fcc(s), any deficiency, or credit any overpayment, to Deposit Account Number (3-005) (enclose an extra copy of this form).				
5. Change in Entity Statu. a. Applicant claims 5	SMALL ENTITY status.	See 37 CFR 1.27.		ger claiming SMALL ENT			
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Authorized Signature	God I Frank L	Lollo			8/2007 48,854		
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